



Health Services LOS ANGELES COUNTY

Los Angeles County
Board of Supervisors

Hilda L. Solis
First District

Mark Ridley-Thomas
Second District

Sheila Kuehl
Third District

Don Knabe
Fourth District

Michael D. Antonovich
Fifth District

July 29, 2016

TO: Supervisor Hilda Solis, Chair
Supervisor Mark Ridley-Thomas
Supervisor Sheila Kuehl
Supervisor Don Knabe
Supervisor Michael D. Antonovich

FROM: Mitchell H. Katz, M.D. *Mitchell Katz*
Director

SUBJECT: **HOUSING FOR HEALTH QUARTERLY REPORT**

Mitchell H. Katz, M.D.
Director

Hal F. Yee, Jr., M.D., Ph.D.
Chief Medical Officer

Christina R. Ghaly, M.D.
Chief Operations Officer

313 N. Figueroa Street, Suite 912
Los Angeles, CA 90012

Tel: (213) 240-8101
Fax: (213) 481-0503

www.dhs.lacounty.gov

On January 14, 2014, the Board instructed the Director of the Department of Health Services (DHS) to submit quarterly reports to the Board on Housing for Health (HFH) permanent supportive housing outcomes including funds, costs, number and composition of clients housed; integrated health, mental health, substance use disorder and benefits establishment results; utilization rate and duration of housing subsidies; number of clients transitioning off of housing subsidies; and characteristics of housing units secured.

BACKGROUND

In November 2012, DHS established the HFH division to expand access to supportive housing for DHS patients who are homeless and who have complex medical and behavioral health conditions and/or are high utilizers of DHS services.

HFH utilizes a full range of community-based housing options, including non-profit owned supportive housing, affordable housing, and private market housing. Tenants receive federal rental subsidies such as Section 8 Project Based or Tenant Based Vouchers or a local rental subsidy through the Flexible Housing Subsidy Pool (FHSP). All individuals who are housed through HFH programs are assigned to a homeless services provider to receive Intensive Case Management Services (ICMS). These services include outreach and engagement; case management with on-going monitoring and follow-up; linkage to health, mental health, and substance use disorder services; assistance with benefits establishment; assistance with life skills, job skills, and educational and volunteer opportunities; crisis intervention, etc. ICMS providers provide "whatever it takes" wraparound services to assist clients in regaining stability and improved health.

To ensure access to high-quality, patient-centered, cost-effective health care to Los Angeles County residents through direct services at DHS facilities and through collaboration with community and university partners.



www.dhs.lacounty.gov

Each Supervisor
July 29, 2016
Page 2

QUARTERLY REPORT

Please find the attached quarterly report in dashboard format. If you have any questions, please contact me or Mark Ghaly, M.D., Deputy Director of Community Health, at (213) 240-8107.

MHK:mg

c: Chief Executive Office
County Counsel
Executive Office, Board of Supervisors

Attachment

HOUSING — FOR — HEALTH

Quarterly Report April-June 2016



Health Services
LOS ANGELES COUNTY

GOALS

- 1. Create 10,000 units of housing**
- 2. End homelessness in LA County**
- 3. Reduce inappropriate use of expensive health care resources**
- 4. Improve health outcomes for vulnerable populations.**

CLIENTS HOUSED

- Housing for Health provides housing and supportive services to homeless clients with physical and/or behavioral health conditions, high utilizers of county services, and other vulnerable populations.

HFH CLIENT PROCESS

CLIENT IDENTIFICATION

by DHS facilities, County departments, CES, and other partners

REVIEW/EVALUATE/ROUTE REFERRALS

by HFH Administrative/Clinical Team

INTERIM HOUSING

**RECUPERATIVE
CARE**

**STABILIZATION
HOUSING**

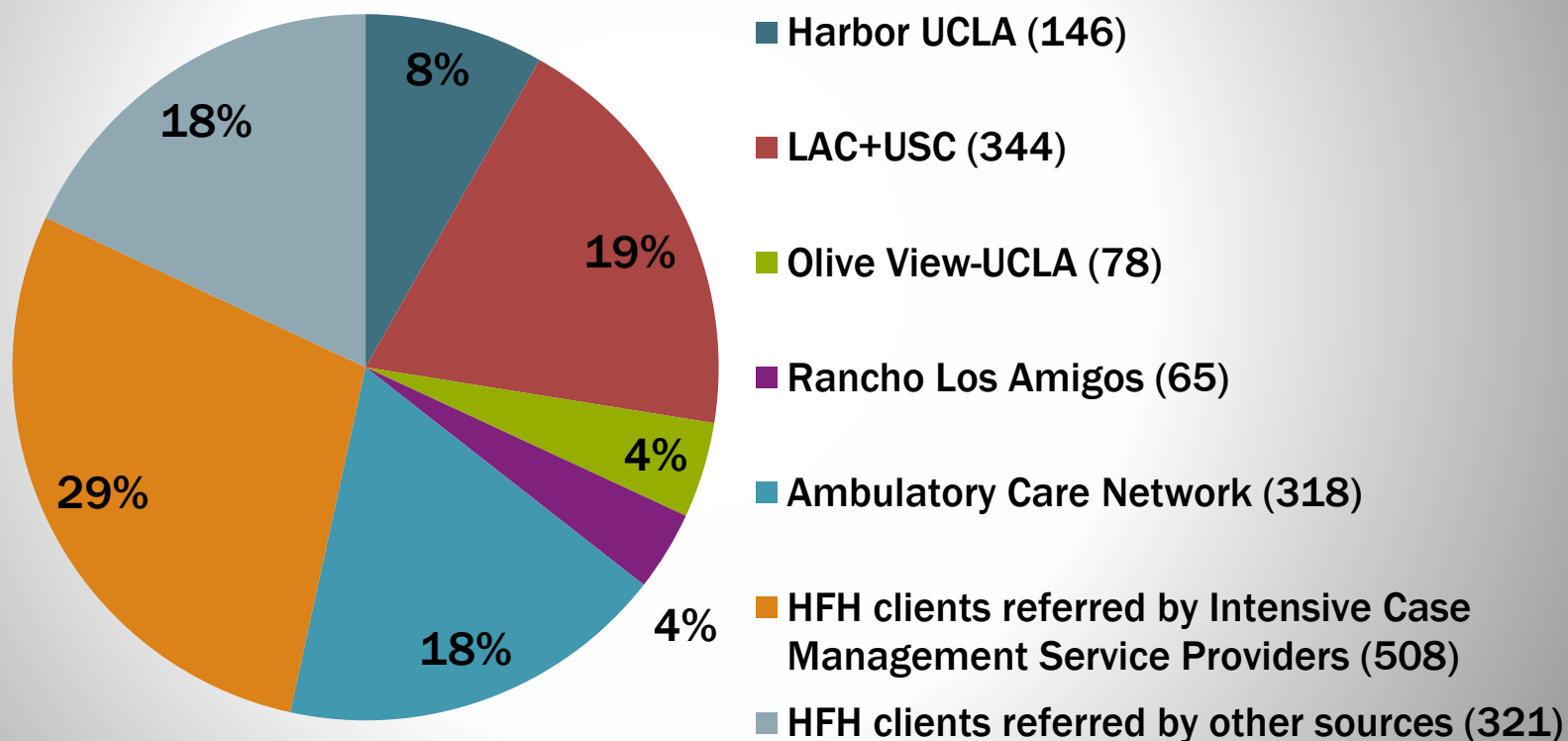
**PERMANENT
HOUSING**

Permanent Supportive Housing Quarterly and Program-to-Date Outcomes

Total # of clients who have attained housing since HFH began in November 2012	1780
Total # of clients who are currently housed	1608
Total # of clients housed April-June 2016	274

WHERE DO HFH REFERRALS COME FROM?

Referral Source of Clients Housed (N=1780)



HEALTH CONDITIONS OF CLIENTS HOUSED

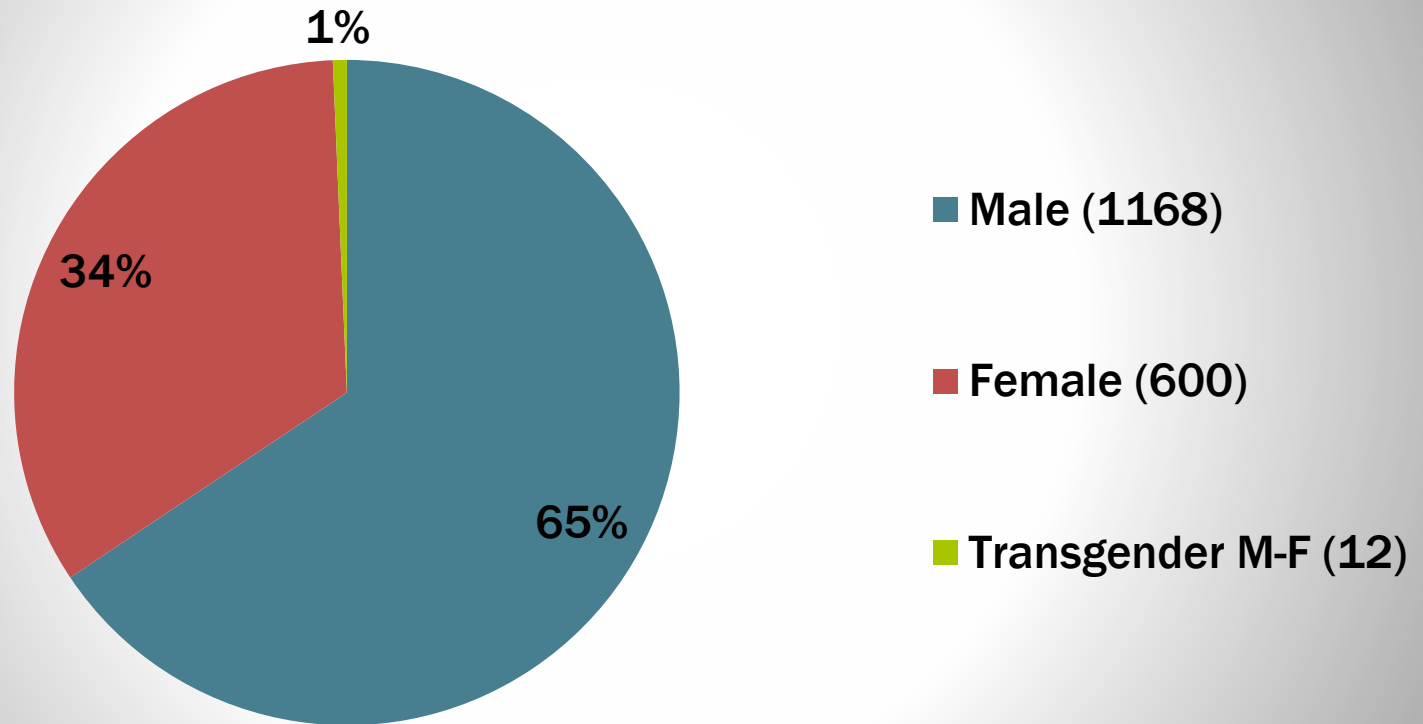
MOST COMMON CONDITIONS:

- Hypertension
- Diabetes
- Asthma
- Heart disease
- Congestive heart failure
- Cancer
- HIV/AIDS
- Hepatitis
- Depression
- Bipolar disorder
- PTSD
- Schizophrenia

Most HFH clients have **MULTIPLE CHRONIC HEALTH CONDITIONS**

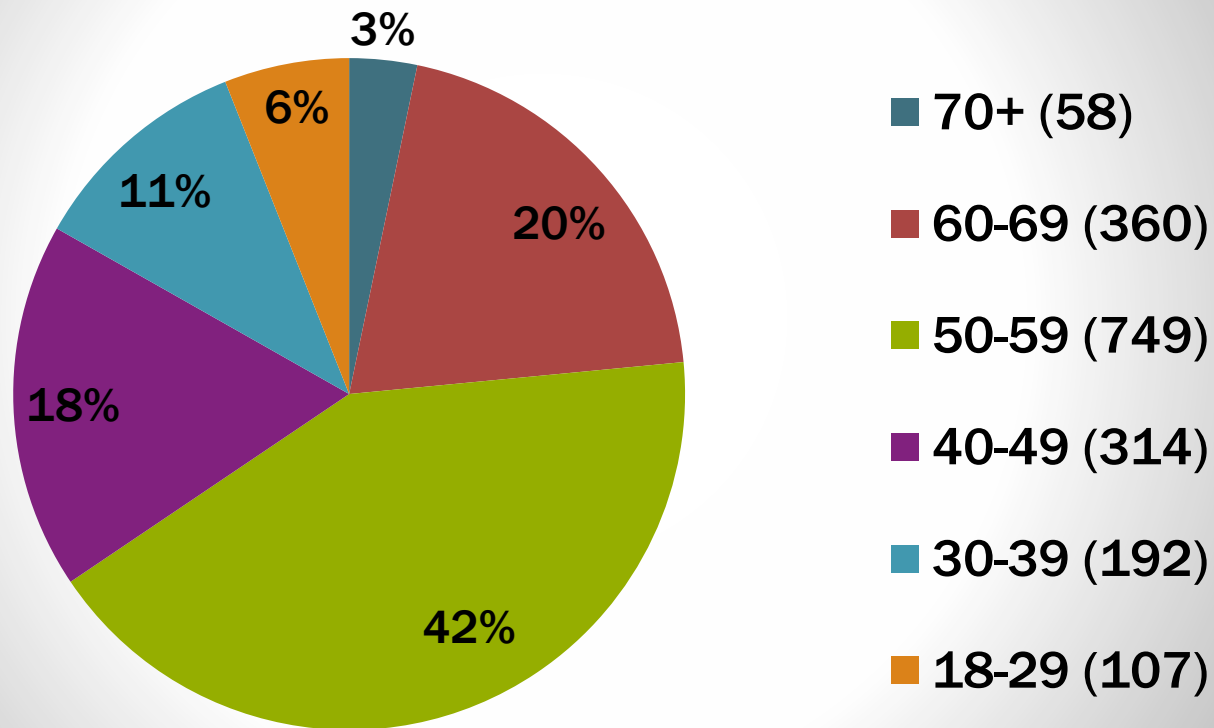
DEMOGRAPHICS OF CLIENTS HOUSED

Gender of Clients Housed (N=1780)

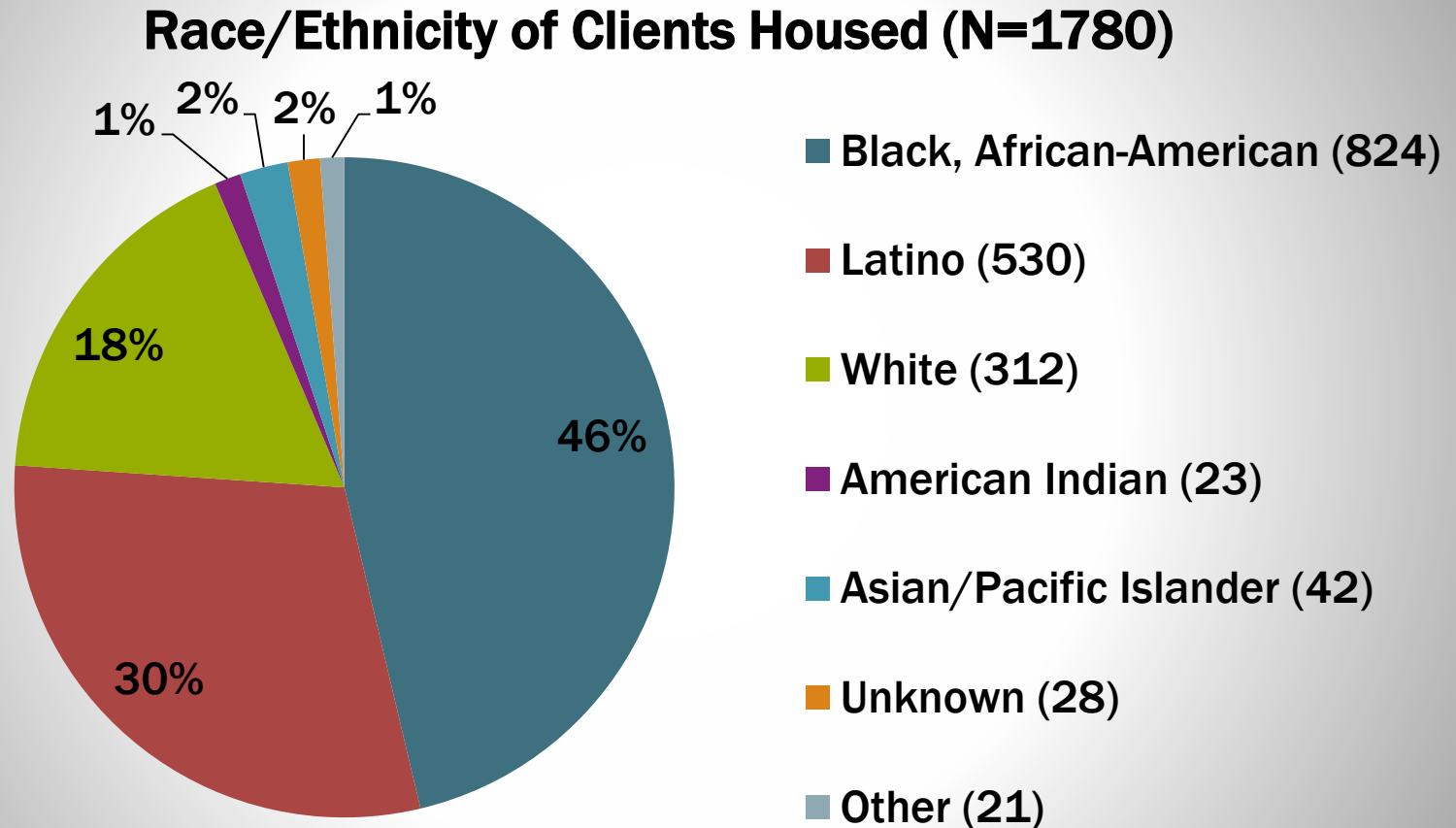


DEMOGRAPHICS OF CLIENTS HOUSED

Age of Clients Housed (N=1780)

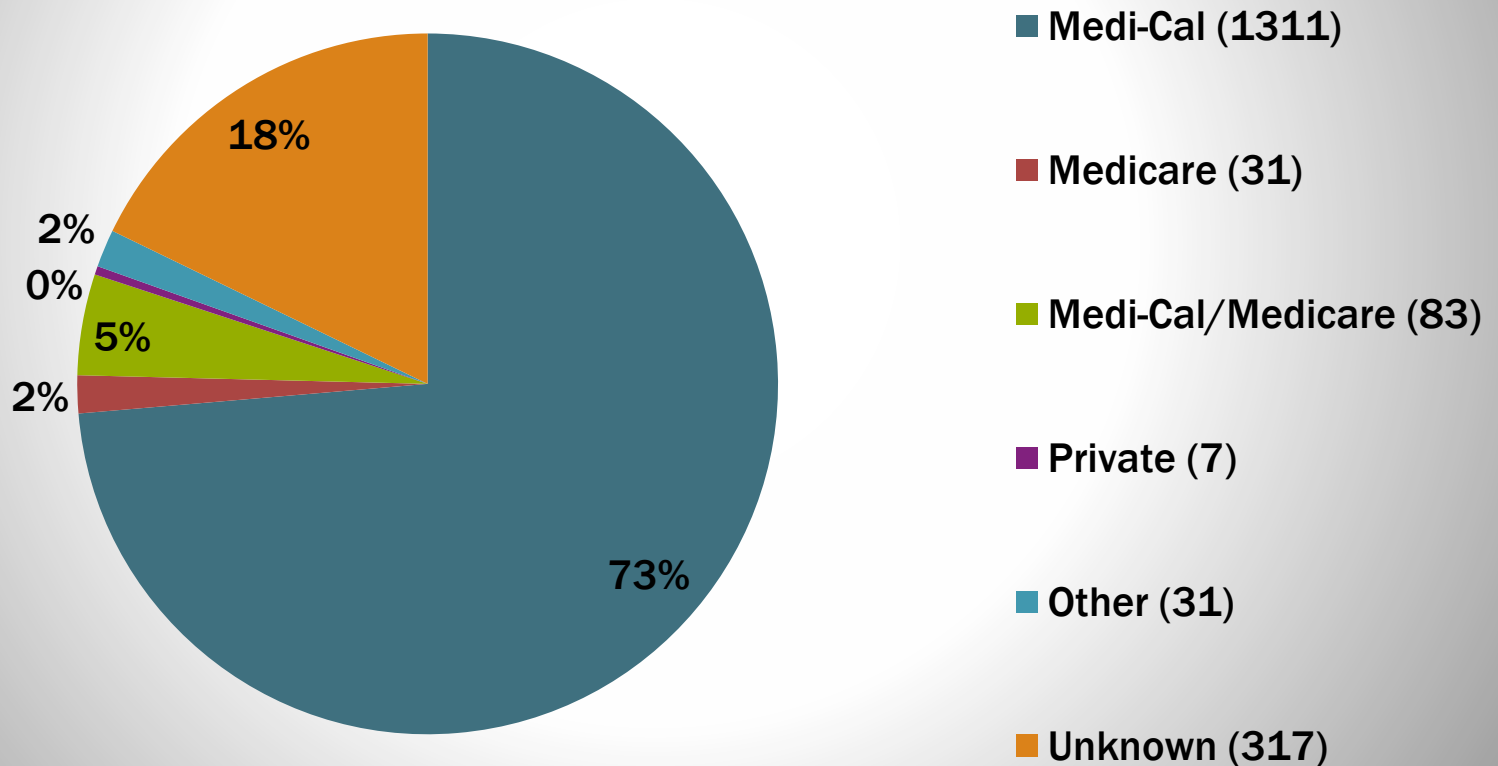


DEMOGRAPHICS OF CLIENTS HOUSED



CLIENT HEALTH INSURANCE

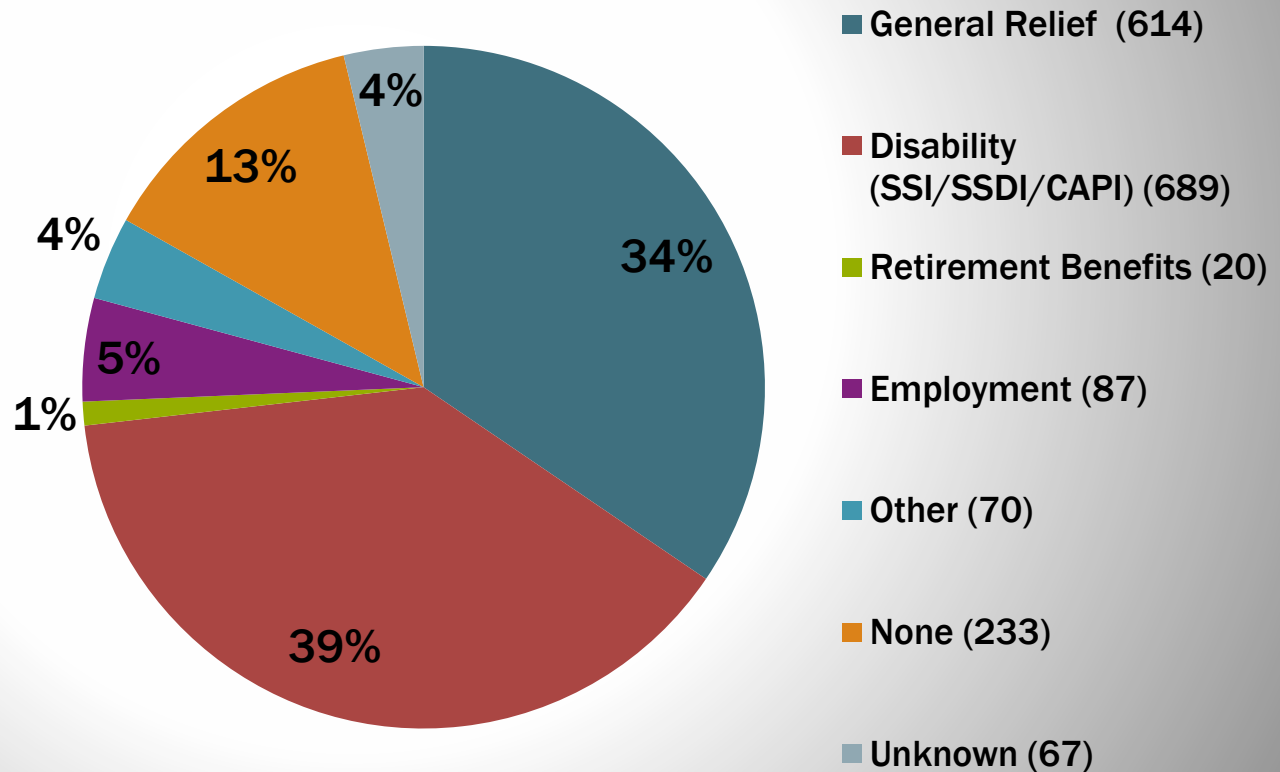
Health Insurance Type for Clients Currently Housed
(N=1780)



CLIENT INCOME

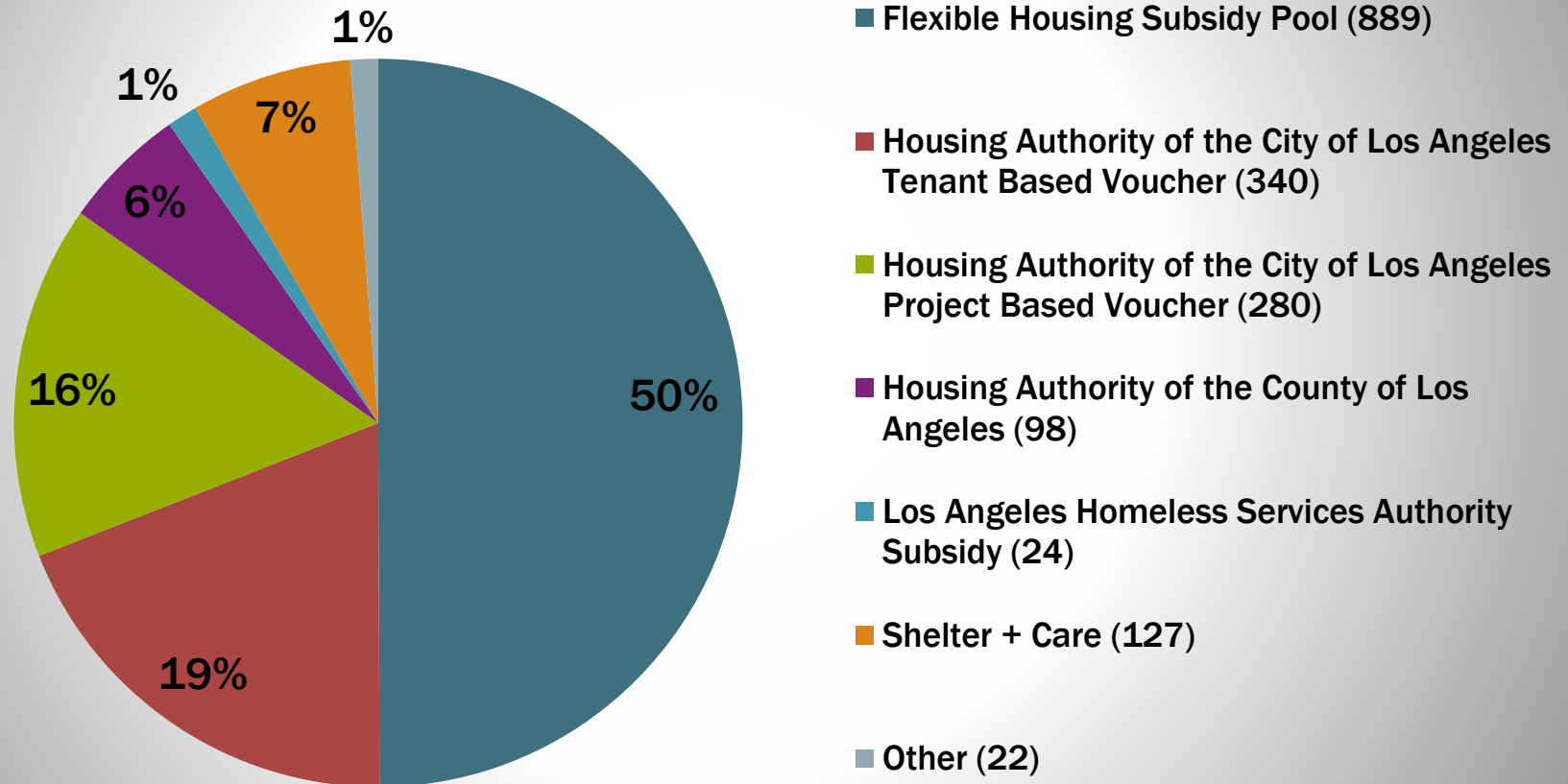
- During the client intake and assessment process, the Intensive Case Management Services (ICMS) provider obtains information on the client's income and health benefits. If the client appears to be eligible for a benefit they are not currently receiving, the ICMS provider will assist them to obtain any necessary documents and will complete and track applications for DPSS Services (CalFresh, Medi-Cal, GR, CalWORKs, and IHSS) and SSI.

Income of Clients Housed (N=1780)



TYPE OF HOUSING SUBSIDY

Subsidy Type for Clients Housed (N=1780)



INTENSIVE CASE MANAGEMENT

- **Every client** connected to services.
- **Individualized service** planning and linkages to health, mental health, and substance use disorder services.
- **Help clients retain** housing and reach health and wellbeing goals.
- **Services provided by** on-site staff or mobile teams.

HOUSING STATUS AND RETENTION

Homeless Status

- The average length of time that clients experienced homelessness was 3 years and 11 months and the median length of time was 2 years.
- The majority of HFH clients were chronically homeless (82%), which means they were homeless for more than one year or experienced four or more episodes of homelessness in the last three years.

Housing retention rate

- 97% of clients retained housing (remained in unit or exited to other permanent housing) after 12 months.

Exits from housing this quarter

- Twenty-nine (29) clients exited housing this quarter. Twelve (12) voluntarily surrendered their unit, seven (7) moved into other independent living situation or moved in with family and friends, four (4) passed away, three (3) were incarcerated, two (2) were evicted and one (1) needed higher level of care.

PERMANENT SUPPORTIVE HOUSING FUNDING

- The sources of funds for the Property Related Tenant Services (PRTS) FHSP work order is DHS County General Fund dollars. The estimated cost for Fiscal Year 2015-16 is \$9.3 million.
- The source of funds for contracted Intensive Case Management Services (ICMS) in permanent supportive housing is DHS County General Fund dollars. The estimated cost for contracted ICMS in permanent supportive housing in Fiscal Year 2015-16 is \$7.9 million.
- The source of funds for the Property Related Tenant Services (PRTS) work order to operate the South Los Angeles Supportive Housing Program (a County/City initiative that provides 56 units of housing to DHS patients who are homeless) is DHS County General Fund dollars. The estimated cost for Fiscal Year 2015-16 is \$200,000.

FLEXIBLE HOUSING SUBSIDY POOL



FHSP PARTNERS



Los Angeles County
Dept. of Health
Services



501(c)3 nonprofit
coordinating community-
based partner



Property owners
throughout Los
Angeles County



LAC-DHS Supportive
Housing Rental
Subsidy Program

FHSP Quarterly and Program-to-Date Outcomes

Move-ins April-June 2016	157
Total move-ins to date	921
Units secured* April-June 2016	130
Total units secured* to date	891

*Refers to the number of units that have been secured under a rental subsidy agreement with the property owner and includes occupied and soon to be occupied units.

CHARACTERISTICS OF FHSP HOUSING UNITS

- Units in the HFH portfolio range in size and type across the County from large apartment buildings to smaller single family homes and are appropriate to household size and composition.
- In the most recent quarter, Brilliant Corners secured an additional 130 units in Los Angeles County for the Flexible Housing Subsidy Pool. Of the 130 units, 21 are studios, 49 are one-bedrooms, 6 are two-bedrooms and 1 is a three-bedroom. Other units include 29 rooms in shared homes and 24 rooms in Residential Care Facilities.
- Brilliant Corners engages with private landlords, local developers, and local property management agencies, in an effort to provide a diverse pool of units to the program. From a wheelchair accessible studio unit located on the ground floor of a small 2 story apartment complex, to a 1-bedroom unit located in a 45 unit complex, Brilliant Corners is able to provide patients with a unit that offers the greatest chances of long-term housing success.

FEATURED HOUSING SITE AND PATIENT STORY



Health Services
LOS ANGELES COUNTY

WINNETKA SENIOR APARTMENTS



In a collaboration with Meta Housing, PATHVentures recently handed over the keys to 20 new residents of the Winnetka Village Senior Apartments. Of the Winnetka's 94 ADA-accessible units, 47 are set aside for Housing for Health clients.

Winnetka Village takes an “aging in place” approach by supporting the residents’ independence and ability to live in the least restrictive environment for as long as possible. All services emphasize enhancing the resident’s quality of life and include community building activities and events to help residents develop a local support network and increase their sense of self-worth.

The building recently hosted a Move-In Party, in which volunteers and staff welcomed the residents to the apartments. This gave residents the chance to meet their neighbors, build relationships in the community, and develop a sense of belonging. At the end of the day, volunteers gave the residents move in kits, comprised of essential home goods such as bedding, kitchen cookware, and bathroom supplies.

FEATURED CLIENT SUCCESS STORY

Tony* says his troubles started at a young age. His father was in the military, moving the family around constantly, but he claims his parents' divorce sparked his self-defeating spiral. After a few stints at Los Prietos Boys Camp for delinquent young men in Santa Barbara County, Tony began doing drugs and ended up in jails across the western United States. His bender continued, driving stolen vehicles to the Midwest and back. His joyride ended with eight years in a Colorado prison. After being released, Tony still wasn't rehabilitated. Instead, he followed a woman to Lancaster and continued destroying his life with drugs.

The woman turned out to be a mixed blessing. "She made me realize that all the things I hated in life, I myself had become," Tony said. "She put a mirror to my face."

It was then that he dusted himself off and sought out the assistance of Mental Health America in early 2015, but admits he wasn't fully ready for their help. "I was so angry when I first came in. It took me a long while before I realized I had nothing to be mad at."

While Tony was sorting out his internal demons, MHA became a partner with Housing For Health's Housing and Jobs Collaborative, which aims to reduce homelessness for single adults who recently became homeless. The program provides a temporary housing voucher and helps clients gain employment so that they can become self-sufficient.

"This program gave a different opportunity to many individuals and gave them that start that they need," says Tina DeRienzo, Tony's case manager at MHA. People in the community know "this is a working program. You're not going to come here and relax. The program will give you an opportunity and it gives you nine months to prove yourself."

The client's contribution of rent increases incrementally during their enrollment in the program until they are able to resume full financial responsibility. The intensive case management service provider, in this case MHA, assists the client with their job search so they can get back on their feet while still receiving case management support.

The structure, DeRienzo says, is what empowers her clients to stay off the streets. "It's amazing to see them get their chance and run with it," she says.

Tony got the keys to his new place a few months ago and is about to receive his first paycheck at an industrial linen company. "It's grueling work," he says. "But I can either do this or sell drugs and go back to jail."

He finally sees that that's not the path he wants to follow and he wouldn't dare let his case manager down.

"I don't have everything but I have everything I need."

*Name has been changed.